

# **February 2016 Montana DUR Board Meeting Minutes**

**Date:** February 17, 2016

**Members Present:** Lisa Sather, Caldwell, Bradley, Burton, Brown, Maxwell (phone), Fitzgerald, Nauts, McGrane, Harrison and Anglim

**Others Present:** Dave Campana, Katie Hawkins and Dan Peterson from Medicaid; Woodmansey, Doppler, Barnhill, and Artis from Drug Case Management/Drug PA; and representatives of drug manufacturers and public.

Lisa Sather opened the meeting.

**Public Comment:**

There was no public comment.

**Meeting Minute Review:**

Meeting minutes from January were approved.

**Department Update:**

Dave Campana, the Montana Medicaid pharmacist welcomed everyone to the 13<sup>th</sup> PDL season. He thanked the attendees and reminded the board to discuss only clinical information. Industry partners were also reminded to refer to the agenda in regard to clinical submissions, specifically, specific dates for submission and types of information. Pharmacoeconomic studies or copyrighted papers are not accepted. If accepted, submissions will be posted on the DPHHS pharmacy website.

## **PREFERRED DRUG LIST MEETING**

Results of the Board review of Group 3 (Red category):

<b>CLASS</b>	<b>DRUG NAME</b>	<b>2016 RECOMMENDATIONS</b>	<b>Grandfather</b>
ANDROGENIC AGENTS, TOPICAL	ND-Natesto®	Class effect	<u>NO</u>
ANGIOTENSIN MODULATORS & Combos	ND-Entresto® ND-Prestalia®	<ul style="list-style-type: none"><li>• ACE Inhibitors and Diuretic Combinations-Class effect, Do not add Tekturna® or Tekturna HCT® (due to aliskiren)</li><li>• ARBs and Diuretic Combinations-Class effect, May add Entresto® (<i>The board requested input from a cardiologist be returned at a future DUR meeting</i>).</li><li>• Angiotensin Modulator Combos-Therapeutic alternatives, May add Prestalia®</li></ul>	<u>NO</u>
ANTICOAGULANTS	ND-Savaysa® NI-Pradaxa®	Must have one LMWH, one novel oral anticoagulant which has a reversal agent, and warfarin. May add others. Continue with existing clinical criteria ( <i>The board requested review of the clinical criteria and also reversal agent(s) at a future DUR meeting</i> ).	<u>NO</u>
ANTIEMETIC/ ANTIVERTIGO AGENTS	ND-Varubi®	Must have one 5-HT3 agent and one metoclopramide product. May add others. Continue with existing prior authorization criteria.	<u>NO</u>

BETA-BLOCKERS	ND-Sotylize®	Must have metoprolol ER and carvedilol in some form. All other single ingredient agents have a class effect. Do not add combo agents containing diuretics-not first line agents and issues of concern with thiazides.	<u>NO</u>
BILE SALTS	ND-Cholbam®	Must have one ursodiol.	<u>NO</u>
COLONY STIMULATING FACTORS	ND-Zarxio®	Therapeutic alternatives	<u>NO</u>
GI MOTILITY, CHRONIC	ND- Movantik®, ND-Viberzi®	Therapeutic alternatives for each of the following categories: OIC: Movantik®, Relistor®, Amitiza® IBS-D: Alosetron, Viberzi®, IBS-C/CIC: Amitiza®, Linzess® Continue PA Criteria.	<u>NO</u>
HYPOGLYCEMICS, INCRETIN MIMETICS/ ENHANCERS	ND-Glyxambi®	DPP-IV-Therapeutic alternatives, must have one single-ingredient agent. GLP-1-Therapeutic alternatives	<u>NO</u>
HYPOGLYCEMICS, Insulin and Related agents	ND-Toujeo® ND-Tresiba®	Class effect for each group. Must have one from each. (Human R, N, Rapid-acting, Long-Acting, Rapid/Intermediate, Reg/Intermediate Combos). <i>(The board requested insulin utilization review at a future DUR meeting).</i>	<u>NO</u>
HYPOGLYCEMICS, SGLT-2	ND-Synjardy®	Class effect. Continue existing PA criteria for class.	<u>NO</u>
LIPOTROPICS, OTHER	ND-Praluent® ND-Repatha®	Must have gemfibrozil and one fenofibrate. May add others. <i>(The board noted Praluent® and Repatha® are appropriate only if statins are maximized and patient meets FDA approved indications/dosing requirements).</i>	<u>NO</u>
PAH AGENTS- Oral and Inhaled	ND-Uptravi® NI-Adcirca® NI-Letairis®	Must have one ERA and one PDE-5. May add others. Retain existing PA criteria and grandfather.	<u>YES</u>
PLATELET AGGREGATION INHIBITORS	ND-Durlaza® NI-Brilinta®	Must have immediate release aspirin. Must have one of prasugrel, clopidogrel, ticagrelor, or vorapaxar. Class effect for other agents. Grandfathered class.	<u>YES</u>
ULCERATIVE COLITIS	NI-Delzicol®	Class effect. Must have more than one route.	<u>NO</u>

Board recommendations for Group 2 (Blue category)- This category of drugs has no new information since last review:

CLASS	2016 RECOMMENDATIONS	Grandfather
ANTIHYPERTENSIVES	Must have amlodipine and a single ingredient thiazide product. May add others. Continue with existing prior authorization criteria.	<a href="#"><u>NO</u></a>
BONE RESORPTION SUPPRESSION & RELATED	Nasal Calcitonins: Class effect. Continue with existing PA criteria. Bisphosphonates and others: Class effect.	<a href="#"><u>NO</u></a>
CALCIUM CHANNEL BLOCKERS (DHP & non-DHP) and COMBOS	Must have a long-acting diltiazem and a long-acting verapamil. Must have amlodipine. All others are class effect.	<a href="#"><u>NO</u></a>
ERYTHROPOIESIS STIMULATING PROTEINS	Therapeutic alternatives	<a href="#"><u>NO</u></a>
ESTROGEN, Oral & Transdermal	Class effect. Must have one topical and one oral.	<a href="#"><u>YES</u></a>
GROWTH HORMONE	Therapeutic alternatives	<a href="#"><u>NO</u></a>
HYPOGLYCEMICS: Alpha Glucosidase Inhibitors	Class effect.	<a href="#"><u>NO</u></a>
HYPOGLYCEMICS: Meglitinides	Class effect.	<a href="#"><u>NO</u></a>
HYPOGLYCEMICS: Metformins	Must have metformin IR. Class effect for others.	<a href="#"><u>NO</u></a>
HYPOGLYCEMICS: Sulfonylureas 2nd gen	Class effect.	<a href="#"><u>NO</u></a>
HYPOGLYCEMICS: TZDs	Class effect. Continue with existing PA criteria.	<a href="#"><u>NO</u></a>
LIPOTROPICS: Statins & Combos	Must have 1 high potency agent. Simcor® and Advicor® are no longer on the market. May add others.	<a href="#"><u>NO</u></a>
PANCREATIC ENZYMES	Class effect.	<a href="#"><u>YES</u></a>
PROGESTINS FOR CACHEXIA	Class effect.	<a href="#"><u>NO</u></a>
PROTON PUMP INHIBITORS	Class effect.	<a href="#"><u>NO</u></a>
VAGINAL ESTROGEN PREPARATIONS	Therapeutic alternatives	<a href="#"><u>NO</u></a>

The next meeting is March 30, 2016 at the Great Northern at 1 PM.

Meeting adjourned at 3:35.